MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
09/623575	

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.								
1	1						51							
2							52							
3		2					53							
4		0					54							
5		1					55							
6		0					56							
7		1					57							
8		0					58							
9		1					59							
10	1						60							
11		0					61							
12		1					62							
13		1					63							
14		1					64							
15		0					65							
16		1					66							
17							67							
18							68							
19							69							
20							70							
21							71							
22							72							
23							73							
24							74							
25		1					75							
26							76							
27	1						77							
28							78							
29							79							
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31							81							
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42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.							TOTAL IND.							
TOTAL DEP.							TOTAL DEP.							
TOTAL CLAIMS							TOTAL CLAIMS							

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT of COMMERCE
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